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## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 1686

SERIAL NUMBER 09/232,566	FILING DATE 01/15/1999  RULE	CLASS 348	GROUP ART UNIT 2613	ATTORNEY DOCKET NO.
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APPLICANTS

ROLF JANSEN, HOUSTON, TX;

\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/071,830 01/20/1998 *TV*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/03/1999

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 2
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35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged

Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

ADDRESS  
 ROLF JANSEN  
 P O BOX 73161  
 HOUSTON, TX  
 77273

TITLE  
 TRACTOR/TRAILER BACK UP KIT

FILING FEE  RECEIVED 380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER 09/232,566	FILING DATE 01/15/99	CLASS 248	GROUP ART UNIT 3632	ATTORNEY D
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APPLICANT

ROLF JANSEN, HOUSTON, TX.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED PROVISIONAL APPLICATION NO. 60/071,830 01/20/98

TV verified

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

TV

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

FOREIGN FILING LICENSE GRANTED 02/03/99

\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 2	INDEPENDENT CLAIMS 2
Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>					

ADDRESS

ROLF JANSEN  
P O BOX 73161  
HOUSTON TX 77273

TITLE

TRACTOR/TRAILER BACK UP KIT

FILING FEE RECEIVED  \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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